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(Re	questor's Name)		
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(City	y/State/Zip/Phone	e#)	
PICK-UP	WAIT	MAIL	
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(Document Number)			
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M. HODGES

PS W. ... PH 2: 10

### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: 610 Clematis & (Name of Limite	etail Propertized Liability Company)	esile
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
RICHARD P. ZARETSKY, F	Name of Person)	
RICHARD P. ZARETSKY, P		
•	(Firm/Company)	
1655 PALM BEACH LAKES BLVD., SUITE 900		
WEST PALM BEACH, FL 334	(Address)	
(City	/State and Zip Code)	
For further information concerning this matter, please	call:	
Susan M. Bryant	at (561 ) 689-666 (Area Code & Daytime Te	0
(Name of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING AI	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, F	

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I- Name:**

The name of the Limited Liability Company is:

610 CLEMATIS RETAIL PROPERTIES, LLC.

#### **ARTICLE II-Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

111 Rumford Way Manalapan, NJ 07726

## ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Richard P. Zaretsky, Esq. 1655 Palm Beach Lakes Blvd. Suite 900 West Palm Beach, FL 33401

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Signature of a member or an authorized representative of a member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalty of perjury that the facts stated herein are true.)

ILIA MODILEVSKY

Typed or printed name of signee